Effective October 1, 2001 09/9/8/6/9															
CLAIMS AS FILED - PART (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN SMALL ENTITY				
TOTAL CLAIMS			رک					RATE	FEE	i	RATE	FEE			
FOR 12/03/01			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00			
TOTAL CHARGEABLE CLAIMS			20 minus 20∞		. 0			X\$ 9=		OR	X\$18=				
IND	EPENDENT CL	AIMS	3 minus 3 =		0			X42=		OR	X84=				
MULTIPLE DEPENDENT CLAIM PRESENT								+140=		OR	+280=				
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL		OR	TOTAL	Pd			
12 23/04 (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL				
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT				IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	• 3	Minus	<b></b> 2	_0	• ~		X\$ 9=		OR	X\$18=				
	Independent	• )	Minus		3			X42≖		OR	X84=				
	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	ENDEN	COAIM		•	+140=		OR	+280=				
C	7 (9 (05 (Column 1) (Column 2) (Column 2)							TOTAL ADDIT. FEE		OR	TOYAL ADDIT. FEE				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	• 6	Minus	<b>**</b> 2	0	• G		X\$ 9=		OR	X\$18≃				
	Independent • 2		Minus exe		3 · O		4	X42≖		OR	X84=				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ا ا	+140=		OR	+280=				
							1	TOTAL ADDIT, FEE		OR	YOTAL ADDIT, FEE	9			
		(Column 1)		(Colu	mn 2)	(Column 3)									
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE			
	Total	•	Minus	**		ą		X\$ 9=		OR	X\$18=				
	Independent	•	Minus	***		8	ŀ	X42=		OR	X84=				
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+140=			+280=				
-	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR OR	TOTAL ADDIT, FEE				
201	If the "Lichaet Nu	mber Previously P	**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

FORM PTO-875 (Rav. 8/01)

\$20 S 000,8001 462-124 ( 531

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERC